

Article 7. Physical Environment**87686 ALTERATIONS TO EXISTING BUILDINGS OR NEW FACILITIES 87686**

- (a) Prior to construction or alterations, all facilities shall obtain a building permit.
- (b) The licensing agency may require the facility to acquire a local building inspection where the agency determines that a suspected hazard to health and safety exists.

Note: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.31 and 1569.312, Health and Safety Code.

87689 FIRE SAFETY 87689

All facilities shall be maintained in conformity with the regulations adopted by the State Fire Marshal for the protection of life and property against fire and panic.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30, 1569.31 and 1569.312, Health and Safety Code.

87690 RESIDENT AND SUPPORT SERVICES 87690

- (a) Nothing in these regulations shall prohibit the provision of required services from a centralized service facility serving two or more licensed facilities when approved in writing by the licensing agency.
- (b) Administrative offices or area shall be maintained in facilities having a capacity of sixteen (16) persons or more, which includes space for business, administration and admission activities, a reception area and restroom facilities which may be used by visitors. Appropriate equipment shall be available, including a telephone. A private office shall be maintained for the administrator or other professional staff as appropriate.
- (c) General storage space shall be maintained for equipment and supplies as necessary to ensure that space used to meet other requirements of these regulations is not also used for storage.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30, 1569.31 and 1569.312, Health and Safety Code.

87691 MAINTENANCE AND OPERATION 87691

- (a) The facility shall be clean, safe, sanitary and in good repair at all times. Maintenance shall include provision of maintenance services and procedures for the safety and well-being of residents, employees and visitors.
 - (1) Floor surfaces in bath, laundry and kitchen areas shall be maintained in a clean, sanitary, and odorless condition.
- (b) A comfortable temperature for residents shall be maintained at all times.
 - (1) The facility shall heat rooms that residents occupy to a minimum of 68 degree F, (20 degrees C).
 - (2) The facility shall cool rooms to a comfortable range, between 78 degrees F (26 degrees C) and 85 degrees F (30 degrees C), or in areas of extreme heat to 30 degrees F less than the outside temperature.
 - (3) Nothing in this section shall prohibit residents from adjusting individual thermostatic controls.
- (c) All window screens shall be clean and maintained in good repair.
- (d) There shall be lamps or light appropriate for the use of each room and sufficient to ensure the comfort and safety of all persons in the facility.
- (e) Water supplies and plumbing fixtures shall be maintained as follows:
 - (1) All community care facilities where water for human consumption is from a private source shall:
 - (A) As a condition of initial licensure, provide evidence of an on-site inspection of the source of the water and a bacteriological analysis by a local or state health department or other qualified public or private laboratory which establishes the safety of the water.
 - (B) Following licensure, provide a bacteriological analysis of the private water supply as frequently as is necessary to assure the safety of the residents, but no less frequently than the time intervals shown in the table below. However, facilities licensed for six or fewer residents shall be required to have a bacteriological analysis subsequent to initial licensure only if evidence supports the need for such an analysis to protect residents.

87691 MAINTENANCE AND OPERATION (Continued)**87691**

Licensed Capacity	Analysis Required	Periodic Subsequent Analysis
Under 6	Initial Licensing	Upon evidence of need
7 through 15	Initial Licensing	Annually
16 through 24	Initial Licensing	Every six months
25 or more	Refer to the county health department for compliance with the California Safe Drinking Water Act, Health and Safety Code, Division 5, Part 1, Chapter 7, Water and Water Systems.	

- (2) Faucets used by residents for personal care such as shaving and grooming shall deliver hot water. Hot water temperature controls shall be maintained to automatically regulate the temperature of hot water used by residents to attain a temperature of not less than 105 degree F (41 degree C) and not more than 120 degree F (49 degree C).
 - (3) Taps delivering water at 125 degree F (52 degree C) or above shall be prominently identified by warning signs.
 - (4) Grab bars shall be maintained for each toilet; bathtub and shower used by residents.
 - (5) Non-skid mats or strips shall be used in all bathtubs and showers.
 - (6) Toilet, handwashing and bathing facilities shall be maintained in operating condition. Additional equipment shall be provided in facilities accommodating physically handicapped and/or nonambulatory residents, based on the residents' needs.
- (f) Solid waste shall be stored and disposed of as follows:
- (1) Solid waste shall be stored, located and disposed of in a manner that will not permit the transmission of a communicable disease or of odors, create a nuisance, provide a breeding place or food source for insects or rodents.

87691 MAINTENANCE AND OPERATION (Continued)**87691**

- (2) Syringes and needles, before being discarded into waste containers, shall be rendered unusable.
 - (3) All containers, except movable bins, used for storage of solid wastes shall have tight-fitting covers on the containers; shall be in good repair; shall have external handles; and shall be leakproof and rodent-proof.
 - (4) Movable bins when used for storing or transporting solid wastes from the premises shall have tight-fitting covers on the containers; shall be in good repair; and shall be rodent-proof unless stored in a room or screened enclosure.
 - (5) Solid waste containers, including movable bins, receiving putrescible waste shall be emptied at least once per week or more often if necessary. Such containers shall be maintained in a clean and sanitary condition.
 - (6) Each movable bin shall provide for suitable access and a drainage device to allow complete cleaning at the storage area.
- (g) Facilities which have machines and do their own laundry shall:
- (1) Have adequate supplies available and equipment maintained in good repair. Space used to sort soiled linen shall be separate from the clean linen storage and handling area. Except for facilities licensed for fifteen (15) residents or less, the space used to do laundry shall not be part of an area used for storage of anything other than clean linens and/or other supplies normally associated with laundry activities. Steam, odors, lint and objectionable laundry noises shall not reach resident or employee areas.
 - (2) Make at least one machine available for use by residents who are able and who desire to do their own personal laundry. This machine shall be maintained in good repair. Equipment in good repair shall be provided to residents who are capable and desire to iron their own clothes.

87691 MAINTENANCE AND OPERATION (Continued)**87691**

- (h) Emergency lighting shall be maintained. At a minimum this shall include flashlights, or other battery powered lighting, readily available in appropriate areas accessible to residents and staff. Open-flame lights shall not be used.
- (i) Facilities shall have signal systems which shall meet the following criteria:
 - (1) All facilities licensed for 16 or more and all residential facilities having separate floors or buildings shall have a signal system which shall:
 - (A) Operate from each resident's living unit.
 - (B) Transmit a visual and/or auditory signal to a central staffed location or produce an auditory signal at the living unit loud enough to summon staff.
 - (C) Identify the specific resident living unit.
 - (2) Facilities having more than one wing, floor or building shall be permitted to have a separate system in each, provided each meets the above criteria.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.30 and 1569.31, Health and Safety Code.

87692 STORAGE SPACE**87692**

- (a) Disinfectants, cleaning solutions, poisons, firearms and other items which could pose a danger if readily available to clients shall be stored where inaccessible to clients.
 - (1) Storage areas for poisons, and firearms and other dangerous weapons shall be locked.
 - (2) In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.
 - (A) Firing pins shall be stored and locked separately from firearms.
 - (3) Ammunition shall be stored and locked separately from firearms.
- (b) Medicines shall be stored as specified in Section 87575(c) and separately from other items specified in (a) above.
- (c) The items specified in (a) above shall not be stored in food storage areas or in storage areas used by or for clients.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

Article 8. Incidental Medical Services**87700 HEALTH AND SAFETY PROTECTION****87700**

- (a) Acceptance by the licensee of residents with incidental medical needs shall be in accordance with the conditions specified in this article.
- (b) The provisions of this article shall be applicable and in conjunction with Articles 1 through 7 of this chapter.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e) and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87701 PROHIBITED HEALTH CONDITIONS**87701**

- (a) In addition to Section 87582(c), persons who require health services or have a health condition including but not limited to those specified below shall not be admitted or retained in a residential care facility for the elderly:
 - (1) Catheter care except as specified in Section 87707.
 - (2) Colostomy/ileostomy care except as specified in Section 87705.
 - (3) Contractures except as specified in Section 87709.
 - (4) Dermal Ulcers, except as specified in Section 87713.
 - (5) Diabetes except as specified in Section 87710.
 - (6) Enemas, suppositories, and/or fecal impaction removal except as specified in Section 87706.
 - (7) Gastrostomy care.
 - (8) Incontinence of bowel and/or bladder except as specified in Section 87708.

87701 PROHIBITED HEALTH CONDITIONS (Continued)**87701**

- (9) Injections except as specified in Section 87711.
- (10) Intermittent Positive Pressure Breathing Machine use except as specified in Section 87704.
- (11) Administration of oxygen except as specified in Section 87703.
- (12) Use of liquid oxygen.
- (13) Naso-gastric tubes.
- (14) Staph infection or other serious infection.
- (15) Residents who depend on others to perform all activities of daily living for them as set forth in Section 87584.
- (16) Tracheostomies.
- (17) Wound care except as specified in Section 87713.

NOTE: Authority cited: Sections 1569.30 and 1569.698(c), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j), 1569.30(b), 1569.312, and 1569.72; Health and Safety Code.

87701.1 HEALTH CONDITION RELOCATION ORDER**87701.1**

- (a) If a resident has a health condition which cannot be cared for within the limits of the license, requires inpatient care in a health facility, or has a health condition prohibited by Section 87582(c) or Section 87701, the Department shall order the licensee to relocate the resident.
- (b) When the Department orders the relocation of a resident, the following shall apply:
 - (1) The Department shall give written notice to the licensee ordering the relocation of the resident and informing the licensee of the resident's right to an interdisciplinary team review of the relocation order as specified in Section 87701.5. Notice of the health condition relocation order and information about the right to request an interdisciplinary team review of the relocation order shall be given to the resident, by the Department, and sent to the resident's responsible person, if any.

87701.1 HEALTH CONDITION RELOCATION ORDER (Continued)**87701.1**

- (A) If the resident has no responsible person, as defined in Section 87101, the relocation order shall be sent to the representative payee, if any. In such cases, the Department shall also notify the State Long-Term Care Ombudsman of the relocation order by telephone.
 - (B) The notice shall advise that the licensee may request an administrative review of the health condition relocation order, and may request that an exception or waiver be granted or reinstated by the Department to allow retention of the resident in the facility.
- (2) The licensee shall prepare a written relocation plan in any instance where the Department does not suspend the facility license. The plan shall contain all necessary steps to be taken to reduce stress to the resident which may result in transfer trauma, and shall include but not be limited to:
- (A) A specific date for beginning and a specific date for completion of the process of safely relocating the resident. The time frame for relocation may provide for immediate relocation but shall not exceed 30 days.
 - (B) A specific date when the resident and the resident's responsible person, if any, shall be notified of the need for relocation.
 - (C) A specific date when consultation with the resident's physician, and hospice agency, if any, shall occur to obtain a current medical assessment of the resident's health needs, to determine the appropriate facility type for relocation and to ensure that the resident's health care needs continue to be met at all times during the relocation process.
 - (D) The method by which the licensee shall participate in the identification of an acceptable relocation site with the resident and the responsible person, if any. The licensee shall advise the resident and/or the responsible person that if the resident is to be moved to another residential care facility for the elderly, a determination must be made that the resident's needs can be legally met in the new facility before the move is made. If the resident's needs cannot be legally met in the new facility, the resident must be moved to a facility licensed to provide the necessary care.

87701.1 HEALTH CONDITION RELOCATION ORDER (Continued)**87701.1**

- (E) A list of contacts made or to be made by the licensee with community resources, including but not limited to, social workers, family members, Long Term Care Ombudsman, clergy, Multipurpose Senior Services Programs and others as appropriate to ensure that services are provided to the resident before, during and after the move. The need for the move shall be discussed with the resident and the resident assured that support systems will remain in place.
 - (F) Measures to be taken until relocation to protect the resident and/or meet the resident's health and safety needs.
 - (G) An agreement to notify the Department when the relocation has occurred, including the resident's new address, if known.
- (3) The relocation plan shall be submitted in writing to the Department within the time set forth in the LIC 809 (Rev. 5/88) Licensing Report by the Department that the resident requires health services that the facility cannot legally provide.
 - (4) Any changes in the relocation plan shall be submitted in writing to the Department. The Department shall have the authority to approve, disapprove or modify the plan.
 - (5) If relocation of more than one (1) resident is required, a separate plan shall be prepared and submitted in writing for each resident.
 - (6) The licensee shall comply with all terms and conditions of the approved plan. No written or oral contract with any other person shall release the licensee from the responsibility specified in this section or Section 87342.1 for relocating a resident who has a health condition(s) which cannot be cared for in the facility and/or which requires inpatient care in a licensed health facility, nor from taking all necessary actions to reduce stress to the resident.
 - (7) In cases where the Department determines that the resident is in imminent danger because of a health condition(s) which cannot be cared for in the facility or which requires inpatient care in a licensed health facility, the Department shall order the licensee to immediately relocate the resident.
- (A) No written relocation plan is necessary in cases of immediate relocation.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.54, and 1569.73, Health and Safety Code.

**87701.5 RESIDENT REQUEST FOR REVIEW OF HEALTH CONDITION
RELOCATION ORDER****87701.5**

- (a) A resident, or the resident's responsible person, if any, shall be permitted to request a review and determination of the Department's health condition relocation order by the interdisciplinary team.
 - (1) If the resident has no responsible person, as defined in Section 87101, the Long-Term Care Ombudsman and/or the resident's representative payee, if any, shall be permitted to submit a request for review and determination on behalf of the resident.
- (b) The resident, or the resident's responsible person, if any, shall have three (3) working days, from receipt of the relocation order, to submit to the licensee a written, signed and dated request for a review and determination by the interdisciplinary team.
 - (1) For purposes of this section, a working day is any day except Saturday, Sunday or an official state holiday.
- (c) The licensee shall mail or deliver such a request to the Department within two (2) working days of receipt.
 - (1) Failure or refusal to do so may be subject to civil penalties, as provided in Section 87454.
- (d) The Department shall give written notification to the resident, or the resident's responsible person, if any, acknowledging receipt of the resident's request for review of the relocation order. Notification shall occur within three (3) working days of receipt by the Department of the request for review.
- (e) Within ten (10) working days from the date of the resident's review request, the licensee shall submit to the Department the documentation specified in Section 87701.5(g) to complete the resident's review request.
- (f) The licensee shall cooperate with the resident, or the resident's responsible person, if any, in gathering the documentation to complete the resident's review request.
- (g) The documentation to complete the resident's review request shall include, but not be limited to, the following:
 - (1) The reason(s) for disagreeing that the resident has the health condition identified in the relocation order and why the resident believes he/she may legally continue to reside in a residential care facility for the elderly.

**87701.5 RESIDENT REQUEST FOR REVIEW OF HEALTH CONDITION
RELOCATION ORDER (Continued)****87701.5**

- (2) A current medical assessment signed by the resident's physician.
 - (A) For purposes of this section, this assessment shall include the information specified in Sections 87702.1(a)(1)(A) through (E).
 - (B) For purposes of this section, "current" shall mean a medical assessment completed on or after the date of the relocation order.
- (3) An appraisal or reappraisal of the resident as specified in Sections 87583(c)(1) and 87587.
 - (A) The licensee shall be permitted to use the form LIC 603 (Rev. 6/87), Preplacement Appraisal Information, to document the appraisal or reappraisal.
- (4) A written statement from a placement agency, if any, currently involved with the resident, addressing the relocation order.
- (h) The Department shall inform the resident and/or the resident's responsible person, if any, in writing, of the interdisciplinary team's determination and the reason for that determination not more than 30 days after the resident or his/her responsible person, if any, is notified of the need to relocate.
- (i) The resident's right to a review of a health condition relocation order issued by the Department shall not:
 - (1) Nullify a determination by the Department that the resident must be relocated in order to protect the resident's health and safety as specified in Section 87582(e)(6).
 - (2) Apply to eviction under Section 87589.
 - (3) Imply a right to a state hearing or any other administrative review beyond that set forth in this section.
 - (4) Apply if the facility license has been temporarily suspended as specified in Section 87342(c).

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.30 and 1569.54, Health and Safety Code.

87702 ALLOWABLE HEALTH CONDITIONS**87702**

- (a) A licensee shall be permitted to accept or retain in a Residential Care Facility for the Elderly persons who have a health condition(s) which requires incidental medical services including, but not limited to, those specific situations specified in Sections 87703 through 87715 of this chapter.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87702.1 GENERAL REQUIREMENTS FOR ALLOWABLE HEALTH CONDITIONS**87702.1**

- (a) The licensee shall complete and maintain a current, written record of care for each resident that includes, but is not limited to, the following:
- (1) Documentation from the physician of the following:
 - (A) Stability of the medical condition(s);
 - (B) Medical condition(s) which require incidental medical services;
 - (C) Method of intervention;
 - (D) Resident's ability to perform the procedure; and
 - (E) An appropriately skilled professional shall be identified who will perform the procedure if the resident needs assistance.
 - (2) The name, address and telephone number of vendors and appropriately skilled professionals providing services.
 - (3) Emergency contacts.
- (b) In addition to Section 87565(c), facility staff shall have knowledge and the ability to recognize and respond to problems and shall contact the physician, appropriately skilled professional, and/or vendor as necessary.
- (c) In addition to Sections 87587 and 87591, the licensee shall monitor the ability of the resident to provide self care for the allowable health condition and document any change in that ability.
- (d) In addition to Sections 87575(a) and 87590(d) the licensee shall ensure that the resident is cared for in accordance with the physician's orders and that the resident's medical needs are met.
- (e) The duty established by this section does not infringe on the right of a resident to receive or reject medical care or services as allowed in Section 87573(a)(16).

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87703 OXYGEN ADMINISTRATION**87703**

- (a) The licensee shall be permitted to accept or retain a resident who requires the use of oxygen administration under the following circumstances:
- (1) If the resident is mentally and physically capable of operating the equipment, is able to determine his/her need for oxygen, and is able to administer it him/herself.
- OR
- (2) If intermittent administration of oxygen by an appropriately skilled professional has been approved by the licensing agency.
- (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
- (1) Monitoring of the resident's ongoing ability to operate the equipment in accordance with the physician's orders.
 - (2) Ensuring that oxygen administration is provided by an appropriately skilled professional should the resident require assistance.
 - (3) Ensuring that the use of oxygen equipment meets the following requirements:
 - (A) A report shall be made in writing to the local fire jurisdiction that oxygen is in use at the facility.
 - (B) "No Smoking-Oxygen in Use" signs shall be posted in the appropriate areas.
 - (C) Smoking shall be prohibited where oxygen is in use.
 - (D) All electrical equipment shall be checked for defects which may cause sparks.
 - (E) Oxygen tanks shall be secured in a stand or to the wall.
 - (F) Under no circumstances shall an extension to the standard seven (7) foot plastic tubing from the nasal canula or mask to the main source of oxygen be permitted.
 - (G) Oxygen from a portable source shall be used by residents when they are outside of their rooms.

87703 OXYGEN ADMINISTRATION (Continued)**87703**

- (H) Equipment shall be operable.
- (I) Equipment shall be removed from the facility when no longer in use by the resident.
- (4) Determining that room size can accommodate equipment in accordance with Section 87577.
- (5) Ensuring that facility staff have knowledge of, and ability in the operation of the oxygen equipment.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code.

Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

**87704 INTERMITTENT POSITIVE PRESSURE BREATHING
(IPPB) MACHINE****87704**

- (a) The licensee shall be permitted to accept or retain a resident who requires the use of an IPPB machine under the following circumstances:
 - (1) If the resident is mentally and physically capable of operating his/her own equipment and is able to determine his/her own need.
- OR
- (2) If IPPB administration by an appropriately skilled professional has been approved by the Licensing Agency.
- (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
 - (1) Monitoring of the resident's ongoing ability to operate the equipment in accordance with the physician's orders.
 - (2) Ensuring that the IPPB procedure is administered by an appropriately skilled professional should the resident require assistance.

**87704 INTERMITTENT POSITIVE PRESSURE BREATHING
(IPPB) MACHINE (Continued)****87704**

- (3) Ensuring that the use of the IPPB equipment meets the following requirements:
 - (A) Equipment shall be operable.
 - (B) Equipment shall be removed from the facility when no longer in use by the resident.
- (4) Determining that room size can accommodate equipment in accordance with Section 87577.
- (5) Ensuring that facility staff have knowledge of and ability in the operation of the IPPB equipment.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code.

Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87705 COLOSTOMY/ILEOSTOMY**87705**

- (a) The licensee shall be permitted to accept or retain a resident who has a colostomy or ileostomy under the following circumstances:
 - (1) If the resident is mentally and physically capable of providing all routine care for his/her ostomy, and the physician has documented that the ostomy is completely healed.
- OR
- (2) If assistance in the care of the ostomy is provided by an appropriately skilled professional and this arrangement has been approved by the licensing agency.
- (b) In addition to Section 87702.1, the licensees shall be responsible for the following:
 - (1) Ensuring that ostomy care is provided by an appropriately skilled professional.
 - (A) When an exception is granted by the Licensing Agency as specified in Section 87721, the ostomy bag and adhesive may be changed by facility staff who have been instructed by this professional.

87705 COLOSTOMY/ILEOSTOMY (Continued)**87705**

- (B) There shall be written documentation by the professional outlining instruction of the procedure and the names of facility staff receiving instruction.
- (C) The professional shall review the procedures and techniques no less than twice a month.
- (2) Ensuring that used bags are discarded as specified in Section 87691(f)(1).
- (3) Privacy shall be afforded when ostomy care is provided.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87706 ENEMA AND/OR SUPPOSITORY AND FECAL IMPACTION REMOVAL**87706**

- (a) The licensee shall be permitted to accept or retain a resident who requires manual fecal impaction removal, enemas, or use of suppositories under the following circumstances:
 - (1) Self care by the resident.
 - (2) Manual fecal impaction, enemas, and/or suppositories shall be permitted if administered according to physician's orders by either the resident or an appropriately skilled professional.
- (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
 - (1) Ensuring that the administration of enemas or suppositories or manual fecal impaction removal is performed by an appropriately skilled professional should the resident require assistance.
 - (2) Privacy shall be afforded when care is being provided.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87707 INDWELLING URINARY CATHETER/CATHETER PROCEDURE**87707**

- (a) The licensee shall be permitted to accept or retain a resident who requires the use of an indwelling catheter under the following circumstances:
- (1) If the resident is physically and mentally capable of caring for all aspects of the condition except insertion and irrigation.
 - (A) Irrigation shall only be performed by an appropriately skilled professional in accordance with the physician's orders.
 - (B) A catheter shall only be inserted and removed by an appropriately skilled professional under physician's orders.
- (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
- (1) Ensuring that insertion and irrigation of the catheter shall be performed by an appropriately skilled professional.
 - (2) Ensuring that bag and tubing are changed by an appropriately skilled professional should the resident require assistance.
 - (A) When an exception is granted by the licensing agency as specified in Section 87721, the bag may be emptied by facility staff who receive supervision and instruction from the appropriately skilled professional.
 - (B) There shall be written documentation by the appropriately skilled professional outlining the instruction of the procedures to facility staff.
 - (3) Ensuring that waste materials shall be disposed of as specified in Section 87691(f)(1).
 - (4) Privacy shall be maintained when care is provided.

NOTE: Authority cited: Section 1569.30(a); Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87708 MANAGED BOWEL AND BLADDER INCONTINENCE**87708**

- (a) The licensee shall be permitted to accept or retain a resident who has a manageable bowel and/or bladder incontinence condition under the following circumstances:
- (1) If the condition can be managed with any of the following:
 - (A) Self care by the resident.
 - (B) A structured bowel and/or bladder retraining program to assist the resident in restoring a normal pattern of continence.
 - (C) A program of scheduled toileting at regular intervals.
 - (D) The use of incontinent care products to keep the resident clean and dry at all times.
 - (b) In addition to Section 87702.1, the licensee shall be responsible for the following:
 - (1) Ensuring that residents who can benefit from scheduled toileting are assisted or reminded to go to the bathroom at regular intervals rather than being diapered.
 - (2) Ensuring that incontinent residents are checked during those periods of time when they are known to be incontinent, including during the night.
 - (3) Ensuring that incontinent residents are kept clean and dry.
 - (4) Ensuring that bowel and/or bladder programs are designed by an appropriately skilled professional with training and experience in care of elderly persons with bowel and/or bladder dysfunctions and development of retraining programs for restoration of normal patterns of continence.
 - (5) Ensuring that the appropriately skilled professional developing the bowel and/or bladder program provide training to facility staff responsible for implementation of the program.

87708 MANAGED BOWEL AND BLADDER INCONTINENCE (Continued)**87708**

- (6) Ensuring that re-assessment of the resident's condition and the evaluation of the effectiveness of the bowel and/or bladder program be performed by an appropriately skilled professional.
- (7) Privacy shall be afforded when care is provided.
- (8) Ensuring that fluids are not withheld to control incontinence.
- (9) Ensuring that an incontinent resident is not catheterized to control incontinence for the convenience of the licensee.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87709 CONTRACTURES**87709**

- (a) The licensee shall be permitted to accept or retain a resident who has contractures under the following circumstances:
 - (1) If the contractures do not severely affect functional ability and the resident is able to care for the contractures by him/herself.

OR

- (2) If the contractures do not severely affect functional ability and care and/or supervision is provided by an appropriately skilled professional and approved by the licensing agency.

87709 CONTRACTURES (Continued)**87709**

(b) In addition to Section 87702.1, the licensee shall be responsible for the following:

- (1) Ensuring that range of motion exercises or other exercise(s), if prescribed by the physician, are performed by an appropriately skilled professional or by facility staff who receive supervision and instruction from an appropriately skilled professional.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e) and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87710 DIABETES**87710**

(a) The licensee shall be permitted to accept or retain a resident who has diabetes if the resident is able to perform his/her own glucose testing with blood or urine specimens, and is able to administer his/her own medication including medication administered orally or through injection, or has it administered by an appropriately skilled professional.

(b) In addition to Section 87702.1, the licensee shall be responsible for the following:

- (1) Assisting residents with self-administered medication as specified in Section 87575.
- (2) Ensuring that sufficient amounts of medicines, testing equipment, syringes, needles and other supplies are maintained and stored in the facility as specified in Section 87575(c).
- (3) Ensuring that syringes and needles are disposed of as specified in Section 87691(f)(2).
- (4) Providing modified diets as prescribed by a resident's physician as specified in Section 87576(b)(7). Substitutions shall be made by the facility dietitian or in accordance with the recognized food exchange recommendations contained in the 1986 publication "Exchange Lists For Meal Planning", published by the American Diabetes Association, Inc. and the American Dietetic Association.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87711 INJECTIONS**87711**

- (a) The licensee shall be permitted to accept or retain a resident who requires intramuscular, subcutaneous, or intradermal injections if the injections are administered by the resident or by an appropriately skilled professional.
- (b) In addition to Section 87702.1, the licensees who admit or retain residents who require injections shall be responsible for the following:
 - (1) Ensuring that injections are administered by an appropriately skilled professional should the resident require assistance.
 - (2) Ensuring that sufficient amounts of medicines, test equipment, syringes, needles and other supplies are maintained in the facility and are stored as specified in Section 87575(c).
 - (3) Ensuring that syringes and needles are disposed of as specified in Section 87691(f)(2).

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87712 PROTECTIVE SUPERVISION**87712**

Renumbered to Section 87724 by Manual Letter No. CCL-95-12, effective 11/16/95.

87713 HEALING WOUNDS**87713**

- (a) The licensee shall be permitted to accept or retain a resident who has a healing wound under the following circumstances:
- (1) When care is performed by or under the supervision of an appropriately skilled medical professional, and is approved by the licensing agency.
 - (2) When the wound is the result of surgical intervention and care is performed as directed by the surgeon.
 - (A) This would include the insertion of eyedrops following cataract surgery.
 - (3) Residents accepted or retained pursuant to Section 87713(a) with a stage one or two dermal ulcer must have the condition diagnosed by a physician and receive care for the dermal ulcer from an appropriately skilled professional.
 - (A) The provision of care under Section (3) above shall be approved prior to admission of the resident by the licensing agency. Licensing agency approval shall include an evaluation of the cause of the dermal ulcer.
 - (B) All aspects of care performed by the medical professional and facility staff shall be documented in the resident's file.

NOTE: Authority cited: Section 1569.30(a); Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87714 TRANSFER DEPENDENCY**87714**

Repealed by Manual Letter No. CCL-92-10, effective 7/21/92.

87715	PRN MEDICATIONS	87715
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Repealed by Manual Letter No. CCL-97-14, effective 6/15/97.

87716	HOSPICE CARE FOR TERMINALLY ILL RESIDENTS	87716
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- (a) The licensee shall be permitted to retain terminally ill residents who receive hospice services from a hospice agency in the facility if all of the following conditions are met:
- (1) The licensee has received a hospice care waiver.
 - (2) The licensee remains in substantial compliance with the requirements of Section 87716, with the provisions of the Residential Care Facilities for the Elderly Act (Health and Safety Code Section 1569 et seq.), all other requirements of Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly, and with all terms and conditions of the waiver.
 - (3) Hospice agency services are contracted for by each terminally ill resident individually, or the resident's Health Care Surrogate Decision Maker if the resident is incapacitated, not by the licensee on behalf of a resident.

87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued)**87716**

- (4) A written hospice care plan is developed for each terminally ill resident by that resident's hospice agency and agreed to by the licensee prior to the initiation of hospice services in the facility for that resident, and all hospice care plans are fully implemented by the licensee and by the hospice(s).
 - (5) The retention of any terminally ill resident in the facility does not represent a threat to the health and safety of any facility resident, or result in a violation of the personal rights of any facility resident.
 - (6) The hospice agency and the resident agree to provide the licensee with all information necessary to allow the licensee to comply with all regulations.
- (b) A hospice care plan shall include the following:
- (1) The name, office address, business telephone number, and 24-hour emergency telephone number of the hospice agency.
 - (2) A description of the services to be provided in the facility by the hospice agency.
 - (3) Designation of the primary care giver and identification of other care givers.
 - (4) A description of the licensee's responsibilities for implementing the plan including, but not limited to, facility staff duties; record keeping; and communication with the hospice agency, resident's physician, and the resident's responsible person(s), if any.
 - (A) The plan shall specify all procedures to be implemented by the licensee regarding the storage and handling of medications or other substances, and the maintenance and use of medical supplies, equipment, or appliances.
 - (B) The plan shall specify, by name or job function, the licensed health care professional on the hospice agency staff who will control and supervise the storage and administration of all controlled drugs (Schedule II - V) for the hospice client.
 - (C) The plan shall neither require nor recommend that the licensee or any facility personnel other than a physician or appropriately skilled professional implement any health care procedure which may legally be provided only by a physician or appropriately skilled professional.

87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued)**87716**

- (5) A description of all hospice services to be provided or arranged in the facility by persons or entities other than the licensee, facility personnel, or the hospice agency including, but not limited to, the resident's responsible person(s), if any.
- (6) Identification of the training needed, which staff members need this training, and who will provide the training relating to the licensee's responsibilities for implementation of the hospice care plan.
 - (A) The training shall include but not be limited to typical needs of hospice patients, such as turning and incontinence care to prevent skin breakdown, hydration, and infection control.
 - (B) The hospice agency will provide training specific to the needs of the individual resident receiving hospice care and that training must precede the provision of hospice care to the resident.
- (7) Any other information deemed necessary by the Department to ensure that the terminally ill resident's needs for health care, personal care, and supervision are met.
- (c) The licensee shall ensure that the hospice care plan complies with the requirements of Section 87716, with the provisions of the Residential Care Facilities for the Elderly Act (Health and Safety Code Section 1569 et seq.), and all other requirements of Chapter 8 of Title 22 of the California Code of Regulations governing Residential Care Facilities for the Elderly.
- (d) The licensee shall ensure that the hospice care plan is current, accurately matches the services actually being provided, and that the client's care needs are being met at all times.
- (e) The Department may require that the licensee obtain a revision of the hospice care plan if the plan is not fully implemented, or if the Department has determined that revision of the plan is necessary to protect the health and safety of any facility resident.
- (f) The licensee shall maintain a record of all hospice-related training provided to the licensee or facility personnel for a period of three years. This record shall be available for review by the Department.
 - (1) The record of each training session shall specify the names and credentials of the trainer, the persons in attendance, the subject matter covered, and the date and duration of the training session.

87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued)**87716**

- (g) In addition to the reporting requirements specified in Section 87561, the licensee shall submit a report to the Department when a terminally ill resident's hospice services are interrupted or discontinued for any reason other than the death of the resident, including refusal of hospice care or discharge from hospice. The licensee shall also report any deviation from the resident's hospice care plan, or other incident, which threatens the health and safety of any resident.
- (1) Such reports shall be made by telephone within one working day, and in writing within five working days, and shall specify all of the following:
- (A) The name, age, sex of each affected resident.
 - (B) The date and nature of the event and explanatory background information leading up to the event.
 - (C) The name and business telephone number of the hospice agency.
 - (D) Actions taken by the licensee and any other parties to resolve the reportable event and to prevent similar occurrences in the future.
- (h) For each terminally ill resident receiving hospice services in the facility, the licensee shall maintain the following in the resident's record:
- (1) The resident's or the resident's health care surrogate decision maker's written request for retention and hospice services in the facility.
 - (2) Copies of admission agreements or other written documentation to verify that the resident has resided continuously in the facility for at least the previous six months.
 - (3) A copy of the written certification statement of the resident's terminal illness from the medical director of the hospice or the physician member of the hospice interdisciplinary group and the individual's attending physician, if the individual has an attending physician.
 - (4) A copy of the resident's current hospice care plan approved by the licensee, the hospice agency, and the resident, or the resident's Health Care Surrogate Decision Maker if the resident is incapacitated.

87716 HOSPICE CARE FOR TERMINALLY ILL RESIDENTS (Continued) 87716

(5) A statement signed by the resident's roommate, if any, indicating his or her voluntary agreement to allow the hospice caregivers into their shared living space.

(A) If the roommate withdraws the agreement verbally or in writing, the licensee shall make alternative arrangements which fully meet the needs of the hospice resident.

(i) Nothing contained in Section 87716 or in Chapter 8 precludes the Department from requiring the relocation of a terminally ill resident whose needs for personal care and supervision or health care are not being met in the facility.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1, 1569.2, 1569.30(a) and (b), 1569.31, 1569.312, 1569.54, and 1569.73, Health and Safety Code.

87720 ADMINISTRATIVE REVIEW - INCIDENTAL MEDICAL SERVICES 87720

(a) For purposes of this article, any request for administrative review of a notice of deficiency, notice of penalty, or health condition relocation order shall be submitted by the licensee or his/her designated representative in writing to the Department and, in addition to the requirements of Section 87455, shall include the following:

(1) The reason(s) the licensee disagrees with the notice or order.

87720	ADMINISTRATIVE REVIEW - INCIDENTAL MEDICAL SERVICES	87720
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(Continued)

- (2) Information about the resident as specified in Section 87702.1(a).
- (3) A current appraisal or reappraisal of the resident as specified in Sections 87583(c)(1) and 87587.
- (4) A written statement from the resident's placement agency, if any, addressing the notice or order.

NOTE: Authority cited: Sections 1569.30 and 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30; 1569.30(b); 1569.312; and 1569.54; Health and Safety Code.

87721	INCIDENTAL MEDICAL RELATED SERVICES EXCEPTIONS	87721
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- (a) As specified in Section 87116 the licensee may submit a written exception request if he/she agrees that the resident has a prohibited health condition but believes that the intent of the law can be met through alternative means.
- (b) Written requests shall include, but are not limited to, the following:
 - (1) Documentation of the resident's current health condition including updated medical reports, other documentation of the current health, prognosis, and expected duration of condition.
 - (2) The licensee's plan for ensuring that the resident's health related needs can be met by the facility.
 - (3) Plan for minimizing the impact on other residents.

NOTE: Authority cited: Section 1569.30(a), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87722 DEPARTMENT REVIEW**87722**

- (a) Certain health conditions as specified in Sections 87703 through 87715 may require review by Department staff to determine if the resident will be allowed to remain in the facility. The Department shall inform the licensee that the health condition of the resident requires review and shall specify documentation which the licensee shall submit to the Department.
- (1) Documentation shall include, but not be limited to the following:
- (A) Physician's assessment(s).
 - (B) Pre-admission appraisal.
 - (C) Copies of prescriptions for incidental medical services and/or medical equipment.
 - (D) Repealed by SDSS Manual Letter No. CCL-89-17, effective 2/13/90.
- (2) The documentation shall be submitted to the Department within 10 days.
- (b) If the Department determines that the resident has an allowable health condition, the licensee shall provide care and supervision to the resident in accordance with the conditions specified in Sections 87703 through 87716.

NOTE: Authority cited: Section 1569.30, Health and Safety Code. Reference: Sections 1569.1; 1569.2(a), (e), and (j); 1569.30(b); and 1569.312; Health and Safety Code.

87724 CARE OF PERSONS WITH DEMENTIA**87724**

- (a) Licensees who accept and retain residents with dementia shall be responsible for the following:
- (1) Ensuring that, in addition to Section 87565, staffing is adequate to provide supervision for residents with dementia while meeting the needs of all facility residents.
 - (A) In addition to Section 87581, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a preadmission appraisal, reappraisal or observation to require awake night supervision.
 - (2) Ensuring that the facility has a nonambulatory fire clearance pursuant to Section 87220 for each room which will be used to accommodate a resident with dementia who meets the definition of a nonambulatory person as specified in Section 87101n.(2) and Health and Safety Code Section 13131.
 - (3) Ensuring that the facility has a written plan of operation which in addition to Section 87222 addresses the needs of residents who require with dementia.
 - (4) Ensuring that facility staff are trained in the areas specified in Section 87565(c), and in dementia care, identifying and reporting resident abuse and neglect, and the behavioral effects of medications on residents with dementia.
 - (5) Ensuring that in addition to Section 87691 safety of the physical plant shall include, but not be limited to, the following:
 - (A) Ranges, heaters, wood stoves, inserts, and other heating devices are made inaccessible.
 - (B) Swimming pools and other bodies of water are fenced.
 - (C) Knives, matches, firearms, tools and other items that could constitute a danger to the residents are stored where they are inaccessible to the residents.
 - (D) Over-the-counter medication in addition to the medications specified in Section 87575 and all toxic substances such as plants and cigarettes are made inaccessible.
 - (E) Yards shall be completely fenced, with self-closing latches and gates.
 - (F) Exterior doors shall include an operational bell/buzzer or other auditory devices to alert staff when the door is opened.
 - (G) The furniture and the equipment shall be safe.

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (6) Ensuring that the documents and information in Sections 87569 through 87570 and 87583 through 87588 are on file at the facility.
 - (A) Each resident with dementia shall have an annual medical assessment and an annual reappraisal, both of which shall include a reassessment of the resident's dementia care needs.
 - (B) When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident, or the resident shall be relocated to another facility or to another residence appropriate for that resident's current needs.
- (7) Ensuring the development of a disaster and mass casualty plan which meets the requirements in Section 87223 and addresses the safety of residents with dementia.
- (b) Without the prior approval of the Department, the licensee may accept and retain residents with dementia who meet the definition in Section 87101(a)(3) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).
- (c) With the prior approval of the Department pursuant to Section 87116, the licensee may accept and retain residents with dementia who do not meet the definition in Section 87101(a)(3) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).
 - (1) With each exception or waiver request the licensee shall submit all of the following:
 - (A) The completed documents and information in Section 87724(a)(6);
 - (B) A plan of operation as specified in Section 87724(a)(3);
 - (C) A training plan as specified in Section 87724(a)(4);
 - (D) An activity program which addresses the needs and limitations of residents with dementia, includes large motor activities, and includes perceptual and sensory stimulation;
 - (E) Resident assessment and reassessment procedures which conform to Sections 87724(a)(6)(A) and (B);
 - (F) Procedures to notify the resident's physician, family members who have requested notification, and conservator, if any, when a resident's behavior or condition changes;

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (G) A written plan developed with the concurrence of each resident's physician, which includes facility-wide practices and resident-specific procedures to minimize the need for psychoactive medications;
 - (H) A disaster and mass casualty plan as specified in Section 87724(a)(7).
- (d) The licensee may use wrist bands and other resident egress alert devices with the prior written approval of the resident or authorized representative, provided that such devices do not violate Section 87572.
- (e) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
- (1) The licensee shall notify the Department immediately after determining the date that the device will be installed.
 - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
 - (3) Following the disaster and mass casualty plan specified in Section 87724(a)(7), fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility staff who provide or supervise resident care and supervision.
 - (4) Without violating Section 87572, facility staff shall attempt to redirect a resident with dementia who attempts to leave the facility.
 - (5) Residents who continue to indicate a desire to leave the facility following an egress delay shall be permitted to do so.
 - (6) Without violating Section 87572, facility staff shall ensure the continued safety of residents with dementia when they wander away from the facility.
 - (7) The licensee shall report to the Department, to the resident's conservator or other responsible representative, if any, and to any family member who has requested notification each incident in which a resident with dementia wanders away from the facility. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.
 - (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents with dementia who leave the facility.
 - (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.

87724 CARE OF PERSONS WITH DEMENTIA (Continued)**87724**

- (f) The following initial and continuing requirements must be met for the licensee to lock exterior doors or perimeter fence gates:
- (1) The licensee shall notify the Department of his/her intention to lock exterior doors and/or perimeter fence gates.
 - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
 - (3) Pursuant to Sections 87116 and 87724(c), the licensee shall obtain a waiver from Section 87582(c)(4), to permit the acceptance of residents with dementia.
 - (4) Pursuant to Section 87116, the licensee shall obtain a waiver from Section 87572(a)(6), to prevent residents from leaving the facility.
 - (5) The licensee shall maintain either of the following documents in the resident's record at the facility and send a copy of the document to the Department within five working days of each resident's admission:
 - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
 - (B) A written statement signed by each resident who has not been conserved that the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
 - (6) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
 - (7) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.
 - (8) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
 - (9) Following the disaster and mass casualty plan specified in Section 87724(a)(7), fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility staff who provide or supervise resident care and supervision.

NOTE: Authority cited: Sections 1569.30(a) and 1569.698(c), Health and Safety Code. Reference: Sections 1569.2(a), (e), and (j), 1569.30(b), 1569.312, 1569.698, and 1569.699, Health and Safety Code.

Article 9. Licensee and Administrator Certification**87730 CERTIFICATION PROGRAM****87730**

- (a) Certification Programs shall be approved by the Department prior to being offered to applicants or administrators.
- (b) Any person or entity seeking approval of a Certification Program shall submit a written request to the Department. The request shall contain the following information:
 - (1) Name, address and phone number of the person(s) or entity requesting approval and the name of the person in charge of the program.
 - (2) Subject title, classroom hours and scheduled dates, duration, time, location and proposed instructor of each class to be offered.
 - (3) Written course description and educational objectives for each class offered.
 - (4) Qualifications, as specified in this section, of each proposed instructor.
 - (5) Geographic areas in which courses will be offered.
 - (6) Types of records to be maintained.
- (c) Certification Program approval shall expire two years from the effective date of the program.
- (d) A written request for renewal of Certification Program approval shall be submitted to the Department and shall contain the information specified in (b) above.
- (e) Within 90 days of receipt of the request for approval or renewal of an approval of a Certification Program by the Department, the Department shall give written notice to the person or entity seeking approval of one of the following:
 - (1) The request is complete.
 - (2) The request is deficient, describing what documents are outstanding and/or inadequate, and informing the person or entity that the information must be submitted within 30 days of the date of the notice.

87730 CERTIFICATION PROGRAM (Continued)**87730**

- (f) If the person or entity does not submit the requested information within 30 days as specified in (e)(2) above, the request for approval of a Certification Program shall be deemed withdrawn provided that the Department has not denied or taken action to deny the request.
- (g) Within 30 days of receipt of an acceptable request for an approval of a Certification Program, the Department shall notify the person or entity in writing whether the request has been approved or denied.
- (h) The Certification Program shall consist of the following components:
 - (1) A minimum of 40 classroom hours with the following basic curriculum:
 - (A) Twelve (12) hours of instruction in laws, including residents' personal rights, regulations, policies, and procedural standards that impact the operations of residential care facilities for the elderly.
 - (B) Three (3) hours of instruction in business operations.
 - (C) Three (3) hours of instruction in management and supervision of staff.
 - (D) Five (5) hours of instruction in the psychosocial needs of the elderly.
 - (E) Five (5) hours of instruction in the physical needs of the elderly.
 - (F) Two (2) hours of instruction in the use of community and support services to meet residents' needs.
 - (G) Five (5) hours of instruction in the use, misuse and interaction of drugs commonly used by the elderly.
 - (H) Five (5) hours of instruction on admission, retention, and assessment procedures.
 - (2) A standardized test developed by the Department.
 - (A) Individuals completing a certification program must pass the test with a minimum score of 70 percent.

87730 CERTIFICATION PROGRAM (Continued)**87730**

(i) Certification Program vendors shall:

- (1) Offer all 40 of the classroom hours required for certification.
- (2) Establish a procedure to allow participants to make up any component necessary to complete the program.
- (3) Within seven (7) days of determination that an individual has completed 40 hours of class instruction, submit the participant's name to the Department.
- (4) Maintain records, available for review by the Department representatives. These records shall include the following information:
 - (A) Class schedules and descriptions
 - (B) List of instructors and qualifications for each, as specified in this section
 - (C) Names of registered participants and documentation of completion of the program
- (5) Ensure that all classes are open to attendance by Department representatives.
- (6) Use persons as instructors who have knowledge or experience in the subject area to be taught and who meet the following criteria:
 - (A) Possession of a four year college degree relevant to the course(s) to be taught, or
 - (B) Possession of a valid California Teacher Credential, or
 - (C) Be a health professional with a valid and current license to practice in California, or
 - (D) Have at least four years' experience in California as an administrator of a Residential Care Facility for the Elderly, within the last eight years, and with a record of administering facilities in substantial compliance, as defined in Section 87101.

87730 CERTIFICATION PROGRAM (Continued)**87730**

(j) The Department may revoke Certification Program approval if the vendor:

- (1) Is unable to provide training due to lack of staff, funds or resources, or
- (2) Misrepresents or makes false claims regarding the training provided.

NOTE: Authority cited: Section 1569.30, Health and Safety Code; and Section 15376, Government Code.
Reference: Sections 1569.1, 1569.2, and 1569.23, Health and Safety Code.